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## BIB DATA SHEET

CONFIRMATION NO. 8862

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/671,985	09/26/2003 RULE	700	3626	YOR920030302US1
<b>APPLICANTS</b> Lorraine M. Herger, Port Chester, NY; Edith Helen Stern, Yorktown Heights, NY; Rose Marie Williams, Wappinger Falls, NY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/17/2003				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/NATALIE PASS/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance np Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 27
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> Ryan, Mason & Lewis, LLP 90 Forest Avenue Locust Valley, NY 11560 UNITED STATES				
<b>TITLE</b> Method and system for patient care triage				
<b>FILING FEE RECEIVED</b> 1044	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit